

# CLAIMS ONLY

SERIAL NO. 101300

APPLICANT(S)

FILING DATE

## CLAIMS

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            | i        |      |                        |      |                        |      |
| 2            |          | 1    |                        |      |                        |      |
| 3            |          | 1    |                        |      |                        |      |
| 4            |          | 1    |                        |      |                        |      |
| 5            |          | 1    |                        |      |                        |      |
| 6            |          | 1    |                        |      |                        |      |
| 7            |          | 1    |                        |      |                        |      |
| 8            |          | 1    |                        |      |                        |      |
| 9            |          | 1    |                        |      |                        |      |
| 10           |          | 1    |                        |      |                        |      |
| 11           |          | 1    |                        |      |                        |      |
| 12           |          | 1    |                        |      |                        |      |
| 13           |          | 1    |                        |      |                        |      |
| 14           |          | 1    |                        |      |                        |      |
| 15           |          | 1    |                        |      |                        |      |
| 16           |          | 1    |                        |      |                        |      |
| 17           |          | 1    |                        |      |                        |      |
| 18           |          | 1    |                        |      |                        |      |
| 19           |          | 1    |                        |      |                        |      |
| 20           |          | 1    |                        |      |                        |      |
| 21           |          | 1    |                        |      |                        |      |
| 22           |          | 1    |                        |      |                        |      |
| 23           |          | 1    |                        |      |                        |      |
| 24           |          | 1    |                        |      |                        |      |
| 25           | 1        |      |                        |      |                        |      |
| 26           |          | 1    |                        |      |                        |      |
| 27           |          | 1    |                        |      |                        |      |
| 28           |          | 1    |                        |      |                        |      |
| 29           |          | 1    |                        |      |                        |      |
| 30           |          | 1    |                        |      |                        |      |
| 31           |          | 1    |                        |      |                        |      |
| 32           |          | 1    |                        |      |                        |      |
| 33           |          | 1    |                        |      |                        |      |
| 34           |          | 1    |                        |      |                        |      |
| 35           |          | 1    |                        |      |                        |      |
| 36           |          | 1    |                        |      |                        |      |
| 37           |          | 1    |                        |      |                        |      |
| 38           |          | 1    |                        |      |                        |      |
| 39           |          | 1    |                        |      |                        |      |
| 40           |          | 1    |                        |      |                        |      |
| 41           |          | 1    |                        |      |                        |      |
| 42           | 1        |      |                        |      |                        |      |
| 43           |          | 1    |                        |      |                        |      |
| 44           |          | 1    |                        |      |                        |      |
| 45           |          | 1    |                        |      |                        |      |
| 46           |          | 1    |                        |      |                        |      |
| 47           |          | 1    |                        |      |                        |      |
| 48           | 1        |      |                        |      |                        |      |
| 49           |          | 1    |                        |      |                        |      |
| 50           |          | 1    |                        |      |                        |      |
| TOTAL IND.   |          |      | 1                      | 1    | 1                      | 1    |
| TOTAL DEP.   |          |      | 1                      | 1    | 1                      | 1    |
| TOTAL CLAIMS |          |      | 1                      | 1    | 1                      | 1    |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS